918

| PATENT | APP | LICA | TION | FEE | DET | ERN | IINATI | ON R | ECORD |
|--------|-----|------|------|-----|-----|-----|--------|------|-------|
|        |     |      |      | _   |     |     |        |      |       |

Effective December 29, 1999

Application or Docket Number 09/646268

| CLAIMS AS FILED - PART I  |                            |            |                                 |  |              |   |                  |          |                    | ENTITY                 |       |                     | R THAN                 |
|---|----------------------------|------------|---------------------------------|--|--------------|---|------------------|----------|--------------------|------------------------|-------|---------------------|------------------------|
| -   | OR                         |            |                                 | Column 1) (Column 2) BER FILED NUMBER EXTR |              |   |                  | 1        | TYPE               |                        | OR    | SMALL ENTITY        |                        |
| <u> </u>  |                            |            | NOWIDER FILED                   |  | NOWBER EXTRA |   |                  | RATE     | FEE                | _                      | RATE  | FEE                 |                        |
| BASIC FEE   |                            |            |                                 | <u></u>                                    |              |   |                  | ] .      |                    | 345.00                 | OR    | 840                 | 690:00                 |
| TOTAL CLAIMS 19 minus 20= •   |                            |            |                                 |  |              | *   |                  |          | X\$ 9=             |                        | OR    | X\$18=              |                        |
| INDEPENDENT CLAIMS 4 minus 3 = *  |                            |            |                                 |  |              |   |                  | X39=     |                    | OR                     | X78=  | 78                  |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |                            |            |                                 |  |              |   |                  |          | +130=              |                        | OR    | +260=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |                            |            |                                 |  |              |   |                  | ,        | TOTAL              |                        | OR    | TOTAL               | 8                      |
| CLAIMS AS AMENDED - PART II   |                            |            |                                 |  |              |   |                  |          |                    |                        |       | OTHER               | THAN                   |
| (Column 1) (Column 2) (Column 3)  |                            |            |                                 |  |              |   |                  |          | SMALL              | ENTITY                 | OR    | SMALL               | ENTITY                 |
| AMENDMENT A   |                            | REM<br>AF  | AIMS<br>AINING<br>TER<br>IDMENT |  | PR           | HIGHEST<br>NUMBER<br>EVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |
| NDN   | Total                      | *          |                                 | Minus                                      | **           |   | =                |          | X\$ 9=             |                        | OR    | X\$18=              |                        |
| AME   | Independent                | *          |                                 | Minus                                      | ***          |   | =                |          | X39=               |                        | OR    | X78=                |                        |
| -   | FIRST PRESE                | ENTATIC    | N OF MU                         | JUIPLE DEI                                 | PEND         | ENT CLAIM                                 |                  |          | +130=              |                        | OR    | +260=               |                        |
|   |                            |            |                                 |  |              |   |                  | L        | TOTAL              | <u> </u>               |       | TOTAL               |                        |
|   |                            |            |                                 |  |              |   |                  |          | DDIT. FEE          | L                      | JOR , | ADDIT. FEE          |                        |
|   | jah ji jaya i sw           |            | ımn 1)<br>AIMS                  |  |              | olumn 2)<br>IIGHEST                       | (Column 3)       | _        |                    | Labbi                  | 1 1   |                     |                        |
| ENT B   |                            | AF         | AINING<br>TER<br>DMENT          |  | PR           | IUMBER<br>EVIOUSLY<br>AID FOR             | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT   | Total                      | *          |                                 | Minus                                      | **           |   | =                |          | X\$ 9=             |                        | OR    | X\$18=              |                        |
| AME   | Independent<br>FIRST PRESE | *          | N OE MI                         | Minus                                      | ***          | ENT OLAIM                                 | =                |          | X39=               |                        | OR    | X78=                |                        |
|   | TITIOTT REGE               |            | NOI WIC                         | CIN CL DLI                                 | LND          | LITTOLATIVI                               |                  | ſ        | +130=              |                        | OR    | +260=               |                        |
|   |                            |            |                                 |  |              |   |                  |          | TOTAL<br>DDIT. FEE |                        | OR ,  | TOTAL<br>ADDIT. FEE |                        |
|   |                            | (Colu      | mn 1)                           |  | (Co          | olumn 2)                                  | (Column 3)       |          |                    |                        |       |                     |                        |
| AMENDMENT C   |                            | REMA<br>AF | AIMS<br>AINING<br>TER<br>DMENT  |  | N<br>PRE     | IGHEST<br>UMBER<br>EVIOUSLY<br>AID FOR    | PRESENT<br>EXTRA |          | RATÉ               | ADDI-<br>TIONAL<br>FEE |       | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total                      | *          |                                 | Minus                                      | **           |   | = .              |          | X\$ 9=             |                        | OR    | X\$18=              |                        |
| WE  | Independent                | *          | 1                               | Minus                                      | ***          |   | = .              | $\vdash$ | X39=               |                        | OR    | X78=                |                        |
|   | FIRST PRESE                | NTATIO     | N OF MU                         | LTIPLE DEP                                 | END          | ENT CLAIM                                 |                  | $\vdash$ |                    |                        |       |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |                            |            |                                 |  |              |   |                  |          |                    |                        | OR    | +260=               |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20."  TOTAL ADDIT. FEE  ***If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                            |            |                                 |  |              |   |                  |          |                    |                        |       |                     |                        |